

## **Rhode Island Preschool Development Grant Birth – Five Planning Grant Narrative**

### **Note on Grant Narrative – January 2023:**

The following document includes the Preschool Development B-5 Planning grant narrative that the State of Rhode Island submitted to the Administration for Children and Families (ACF) on November 3, 2022.

On December 28, 2022, the Executive Office of Health and Human Services as part of a cross-agency effort was awarded a one-year \$4 million grant to support planning around the State's [Birth through Five Strategic Plan](#).

This opportunity is distinct from Rhode Island's Preschool Development B-5 Renewal Grant that was awarded in 2020.

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**Project Title:** RI PDG B-5 Planning Grant Proposal      [www.kids.ri.gov/cabinet](http://www.kids.ri.gov/cabinet)  
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**Project Abstract**

Rhode Island (RI) proposes to use the PDG B-5 Planning grant to propel the state's B-5 system into the next phase of development, building off the extensive work conducted through the Initial and Renewal PDG B-5 grant and over a decade of focused state and community-wide collaboration supported by federal awards and state funding. RI's shared B-5 Governance structure and Strategic Plan developed through the Initial PDG enabled RI to effectively address the ongoing and emerging needs from COVID-19. For example, informed by the strategies of the state's ECCE Strategic Plan, RI used discretionary stimulus funding to provide direct retention bonuses to early educators, expand higher education access for early educators, provide start-up grants to new home-based child care providers, and stabilize the Early Intervention (IDEA Part C) workforce. By aligning investments to the state's existing ECCE Strategic Plan, RI ensured that the B-5 system would build back stronger from the pandemic and be on track to address root challenges, such as educator compensation.

Even as RI has worked to secure the B-5 system and continue to make progress, many children and families continuously face gaps in supports and services and B-5 workforce continues to be undercompensated leading to staff shortages and turnover. For example, RI has lost a significant number of licensed child care providers in the pandemic. In addition, 77% of age-eligible children have not been screened for developmental needs, despite RI having a goal of universal screening. RI seeks to serve the children in RI who are at the highest risk of being unprepared to enter kindergarten. RI's priority populations include: children of low-income families, children with developmental delays, children who have mental health challenges, children facing trauma – particularly victims of child abuse or neglect, and children from races/ethnicities that have been historically excluded from opportunity.

RI greatly appreciates the Initial and Renewal PDG B-5 grants and is positioned to continue using new funds to advance the state's system towards increased equity and access. RI proposes to use the PDG B-5 Planning opportunity to plan, coordinate, and build capacity to better serve our priority populations by pursuing the following activities: (1) Enhance the existing comprehensive needs assessment with focused activities on ECCE workforce compensation and on services needed for multi-lingual learners; (2) Enhance the state's comprehensive, statewide ECCE strategic plan through targeted planning for early childhood mental health, alignment of developmental supports, expansion of RI Pre-K, and infant/toddler care; (3) Maximize parent choice, knowledge, and engagement by meaningfully engaging caregivers in system governance and piloting community-embedded resource and referral services; (4) Support providers by sharing best practices and enhancing quality frameworks, piloting supplemental compensation for highly-qualified educators, and addressing articulation across higher education; (5) Improve overall quality by addressing needs identified in the needs assessment and strategic plan, with a focus on early childhood mental health; and (6) Build on our integrated data performance evaluation platform to ensure that RI's work is leading toward improved child-level outcomes.

### **Expected Outcomes:**

Over the course of the next year, RI will build on the strong ECCE framework developed through prior PDG grants to recover from the pandemic and continue progress to improve system-, family-, and provider-level outcomes for the state's priority populations. Collectively, these activities will improve access and equity for priority populations across the Early Childhood Care and Education (ECCE) system. At the systems level, RI will improve coordination and transitional supports; better attract, retain, and support the ECCE workforce; and strategically target investments across agencies and programs. At the family level, RI will engage families in B-5 governance and increase family choice through enhanced application and engagement strategies. At the provider level, RI will increase quality and disseminate best practices to better serve priority populations. The state's performance will be measured and evaluated across all outcomes to determine effectiveness and support continuous improvement.

### **Approach:**

In the following sections, RI details a plan of action that describes the scope and scale of RI's proposed PDG B-5 project. RI will conduct needs assessments; enhance the state's comprehensive ECCE Strategic Plan; maximize parent choice, knowledge, and power; support providers in sharing and implementing best practices; directly support workforce retention, attraction, and compensation; and make improvements in B-5 quality. RI is confident in the state's ability to accomplish the proposed activities because of RI's history of successful system-wide collaboration to improve outcomes and RI's Governor and agency leadership's commitment to investing and supporting the B-5 system. While interagency collaboration and coordination can pose obstacles, RI will address these by building on existing collaborative structures that have proven effective, particularly the ECCE Governance structure developed

through PDG B-5 Initial and Renewal. These structures and teams will support RI in accomplishing the goals of this grant. RI will augment state capacity with expertise and capacity from consultants as described in Activities 1-5 and the Performance Evaluation (per RI's procurement rules, specific consultants or vendors cannot be named as these must go out to bid upon receipt of the grant to ensure a fair and competitive process, *see Budget Justification*.) RI's early childhood sector includes children, families, providers, state staff, and additional stakeholders (*see Stakeholder Engagement section*). From a programmatic perspective, RI's Early Childhood Care and Education (ECCE) sector includes early care learning programs such as child care, RI Pre-K, Early Intervention, IDEA Part B Sec. 619, and home visiting. Additional programs that support young children and their families on specific aspects of early childhood include the Department of Children, Youth, and Families, nutrition and income support, Medicaid, and the Office of the Post-Secondary Commissioner.

### **Activity 1: Conduct or Update Comprehensive Statewide B-5 Needs Assessment**

RI has leveraged past PDG B-5 funds to conduct various comprehensive B-5 needs assessments (NA) to support the development of our B-5 system. This includes family experience surveys, early learning facilities NA, and a B-5 sector-wide workforce NA. These NAs have been important drivers in policy development and implementation, informing both our ECCE State Strategic Plan (ECSP) and statewide policy and investments, such as the development of an Early Learning Facilities Bond of \$15M. RI has a comprehensive, regularly updated NA derived from two key sources: the annual NAs in the form of the KIDS COUNT Factbook and the quarterly updated ECCE Scorecard developed through PDG B-5 Renewal (*see PPEP for more details*). During the implementation of our ECSP, and in the wake of COVID-19, RI has identified two aspects of our comprehensive NA that would benefit from new or enhanced

assessments: a NA focused on needs of Multi-lingual Learners (MLLs) in Early Childhood (*Activity 1.1*) and an updated ECCE workforce wage & compensation study (*Activity 1.2*). These two NAs will provide important baseline data, enhance RI's comprehensive NA, and allow RI to continue to develop data-driven strategies to achieve our system goals.

**Current ECCE Data Capacity & Unduplicated Counts of Children:** The ECCE Scorecard, conducted by the EOHHS Ecosystem, (*see PPEP*), allows RI the ability and capacity to meet requirements for unduplicated counts of children participating in and/or receiving ECCE services across RI through integrating child level data from education, health, Medicaid, child welfare, human services, housing, and more. Examples of child-level data include: lead screening outcomes, immunizations, homelessness, and indicated child abuse or neglect, as well as participation in ECCE programs such as short- and long-term Family Home Visiting, Early Childhood Special Education (IDEA Part B, 619) Early Intervention (Part C), RI Pre-K, Child Care Assistance Program (CCAP), Medicaid, Supplemental Nutrition Assistance Program (SNAP), and more. This is enabled through various data sharing agreements and state-agency partnerships. To date, RI has captured data for 105,578 unique children that were between birth to five (B-5) years of age beginning in 2018. Currently in 2022, RI has just over 49,000 B-5 children engaged in any programs or services of the ECCE system, meaning the Scorecard accounts for approximately 76% of all RI children currently under age six according to the American Community Survey. Data in the ECCE Scorecard – including ECCE program participation rates – can be analyzed at the child level by geography and by key priority populations, as defined in RI's ECSP. ECCE Scorecard metrics track RI's progress on the objectives, strategies, and actions in RI's ECSP and include metrics that assess availability of high-quality programs, equitable access to child care, access to high-quality RI Pre-K, and access

to early developmental supports such as Early Intervention (IDEA Part C). With the ECCE Scorecard, built through PDG Renewal, RI can now assess access to programs for each priority population as well as information about overall demographics. For example, current data shows that since 2018 nearly 20% of children eligible for Child Care Assistance Program (CCAP) do not enroll in CCAP, a proportion that has remained highest for children born since 2018, and among historically excluded racial and ethnic groups. While the ECCE Scorecard offers significant insight into our ECCE system, there are also remaining gaps including the inability to capture detailed information regarding waitlists for programs or to continuously capture qualitative experience from diverse family perspectives. RI will continue to build upon this work and strive to overcome barriers to continue to promote a culture of continuous quality improvement (CQI). **Project Timeline and Milestones:** RI's comprehensive NA of the ECCE Scorecard will be updated quarterly and the annual KIDS COUNT Factbook will be released in Q3. To enhance the comprehensive NA, in Q1, RI will work with the interagency state team and with ECCE stakeholders (*see Stakeholder Engagement Section*) to develop the proposed scope of work for both *Activity 1.1 (Multi-Lingual Learners NA)* and *1.2 (Wage & Compensation NA)* NAs before soliciting vendors to complete the work. RI procurement procedures require contractors be selected post-award, therefore information on the specific vendors used for this project are not available. For both *Activity 1.1 and 1.2*, RI will use Q2 and Q3 to complete the NA and disseminate information publicly. (*See Project Timeline and Milestones section*).

**Family & Stakeholder Engagement:** Throughout the NA process, RI will engage partners to ensure that the NA are responsive to the field and will meaningfully engage parents/caregivers. RI has a record of successfully and meaningfully engaging stakeholders and families in both prior PDG opportunities. In 2022, RI conducted a family NA focused on experiences in early

learning. During this process, RI worked with numerous stakeholders – both in and out of state government – to ensure the report would have meaningful and accurate information. This included numerous touchpoints with families, service providers, and advocates to review the initial survey tool, review initial data, and provide feedback on the draft final report. In this way, RI ensured that the data from the NA was meaningful, accessible, and useful for a broad set of stakeholders. For example, the state team met with parent participants in the RIDOH-facilitated and PDG Renewal-funded Parent Caregiver Advisory Council (P/CAC), who offered important edits to the survey tool, adding questions about potential barriers for families including non-standard hour care and transportation. This type of feedback substantively improved the survey tool, enabling RI to capture important data about family experience in RI. The RI interagency state ECCE team will develop a solicitation for Activities 1.1 and 1.2 NAs and will engage external stakeholders, as appropriate, based on RI’s procurement policies. During the data collection phase, state staff will ensure that vendors have ample contact information for key stakeholders including our strategic partners (*see Stakeholder Engagement Section*). Once conducted, RI will continue to engage internal and external stakeholders to support understanding of the data and development of recommendations. This includes initial input sessions to identify goals of the NA, interim check-ins on outreach and engagement to ensure the entire ECCE field is engaged, and data review sessions to interpret, analyze, and contextualize the findings. In particular, given Activity 1.1’s focus on multi-lingual learners (MLLs), RI will ensure that the vendor supporting this work is able to connect with caregivers and providers in a variety of languages. This MLL focus will also support the inclusion of Family Child Care providers, many of whom in RI speak Spanish. **Activity 1.1 Multi-lingual Learners Needs Assessment:** The Rhode Island Department of Education (RIDE) is committed to supporting

MLLs and co-created a Blueprint for Success for MLL students with a wide array of family, education, and community stakeholders in 2021. Supporting MLLs is vital in RI, as 11% of students in K-12 are MLL students – a population that has been growing year over year. Speaking multiple languages is an important asset that RI seeks to bolster and support, but also recognizes that having a primary language other than English can be a barrier to accessing services and advancing educationally. The current Blueprint articulates a vision, grounded in research-based principles, that lays out what conditions must be in place at all levels of the educational systems for MLLs to thrive and what systemic improvement of MLL instruction needs to occur. However, the Blueprint currently only applies to children in our K-12th grade system. It is critical that children B-5 have coordinated supports before kindergarten and that support transitions into K-12 education. With PDG funding, RI proposes to conduct an NA of what B-5 MLL children need to identify recommendations on how best to support MLLs in ECCE settings. The goals of this work will be for RI to have a better understanding of the current ECCE MLL population and needs, the current research and best practices for ECCE MLL supports, and the available resources and opportunities to formally align MLL supports for children B-5 with those in the K-12th grade system. RI will work with the state’s MLL and ECCE teams to determine a scope of work appropriate for a consultant to design and conduct research on the B-5 MLL population. Engaging with national experts will allow RI to understand national best practice to inform future strategic planning (*see Activity 2*). RI would require the vendor to engage with a diverse group of stakeholders in multiple languages and support the engagement through multi-lingual forums, with a focus on engaging multilingual families currently utilizing the ECCE system by partnering with community-embedded parent organizations such as Parents Leading for Educational Equity (PLEE).

**Activity 1.2 Wage & Compensation NA & Recommendations: Current Workforce Needs:** RI

will conduct an ECCE professionals wage and compensation study to obtain post-pandemic data to inform and strengthen workforce pathways and address compensation. RI is committed to supporting the ECCE workforce and has leveraged various funding sources to support workforce pathways projects (more information available in *Activity 4*). RI has previously conducted the 2019-RI PDG B-5 workforce NA and a 2022 RI Head Start Wage Comparability Study, both of which have provided the state with valuable information about wages and approaches to reducing turnover in the ECCE field. Considering changes driven by COVID-19, the 2019 workforce NA is now out of date, making it challenging for RI to use that data to meaningfully address compensation, retention, and/or wage equity. *Activity 1.2* would leverage data from those previous assessments and provide RI with significantly more relevant and timely wage data to understand the current picture of wages and benefits. The study will assist RI in developing targeted, sustainable, data-informed action steps to address compensation (*see Activity 2*) that can be implemented going forward (*see Activity 5*). This will likely include supporting new ECCE policy initiatives, strengthening existing workforce pathways, and developing strategies to bridge the compensation gap. To meet the needs of the field, the wage study will focus on RI DHS licensed centers (including Head Start), Family Child Care (FCC) home care providers, and LEA-based early educators, using broader ECCE sector wages and similarly compensated and credentialed positions across the mixed-delivery system and in the RI workforce as a comparison point. RI will seek input from the Early Learning Council, Career Pathways Advisory Committee members, and current workforce members about key information to gather, which may include: staff turnover, educator experience, formal and informal education, staff roles, compensation history, additional means of income, work hours, employee benefits including health care, paid

time off, sick and vacation time. Ultimately, RI anticipates that this study will result in both critical data about the current state of the field coming out of the pandemic as well as key recommendations for the state to ground future workforce policy in, with a focus on addressing persistent low compensation in the field. **Impacts of the Pandemic:** To support educators and, by extension, the mixed-delivery system, RI is using American Rescue Plan State Fiscal Recovery Funds (SFRF) to provide retention bonuses (PRB) to early childhood educators. Educators are eligible for up to \$3,000 annually (paid as \$750 every three months). As of October 2022, DHS has distributed approximately \$10 million to over 4,000 early educators. Additionally, as of October 2022 using SFRF, DHS has provided startup grants to 36 Family Child Care programs to incentivize new providers opening, and thereby increasing capacity in a key piece of the mixed delivery system that was particularly hard-hit by the pandemic (approximately 13% of FCC licensed capacity was lost in RI during COVID-19). These programs have both directly supported the workforce as well as provided initial data on the current state of the workforce that RI can leverage to inform the scope and development of Activity 1.2. **Workforce Data:** In the FY23 budget, RI allocated SFRF funding for a new workforce registry which is crucial for the state to have an ongoing mechanism to capture timely data about and directly communicate with the ECCE workforce. RI currently has limited data about the workforce and no way to regularly update that data, though the state has collected data through the retention bonus program which will be migrated to the new system. In addition, the ECCE Scorecard will leverage the new system for ongoing data analysis.

**Career Pathways:** An interagency workgroup, made up of representatives from RIDE, DHS, the Governor's Office, and the Office of the Post-Secondary Commissioner (OPC) meets regularly to implement stimulus funding from the Governor's Emergency Education Relief Fund (GEER)

at OPC to fund the mapping of existing ECCE career pathways and determine what programming would fill current gaps. This applies to both institutions of higher education (IHE) as well as the broader professional development (PD) and learning landscape. Having an interagency perspective allows the team to understand licensure at all levels and build on workforce initiatives throughout the mixed-delivery system. A key deliverable of this work in 2022 was a comprehensive NA related to the gaps and opportunities related to attain credentials and/or degrees, scholarships and student supports, and articulation agreements across institutions. This NA drove updates to the comprehensive ECSP related to workforce goals and initiatives (*see Activity 4 for additional information*). The NA was developed through multiple stakeholder interviews, including educators, providers (including FCCs), IHEs, and advocates.

**Barriers to Funding and Sustainability:** During the COVID-19 pandemic, RI worked to support programs and providers through several initiatives aimed at ensuring the preservation of our state’s mixed-delivery system. This included program and educator based financial awards. Despite these efforts, like other states across the country, RI saw programs close, and educators leave the profession. These are real barriers to strengthening our mixed-delivery system. Given the labor-intensive work of ECCE, staff salaries and benefits are the major cost driver within the ECCE system. For RI to understand the existing and emerging needs associated with the sustainability of ECCE programs, RI needs new, timely information on the true cost of service delivery and the compensation needed to attract and retain qualified professionals in ECCE. Our proposed *Activity 1.2* will support our understanding of the impact of COVID-19 in our workforce and provide the relevant information to support sustaining ECCE going forward.

## **Activity 2: Develop or Update Comprehensive Statewide B-5 Strategic Plan:**

Through PDG B-5 Initial (2019), RI developed and adopted a comprehensive strategic plan that addresses coordinated ECCE governance across state government, expansion of high-quality programs, increased equitable access for children and families to ECCE programs, workforce compensation and career pathways, coordinated financing, increased coordination for transitions, and enhanced use of integrated child-level data. This ECCE Strategic Plan (ECSP) has been updated annually since 2020 to incorporate the findings of NAs, consider stakeholder feedback, respond to emerging needs such as those from COVID-19, and recognize actions completed and new actions needed. The ECSP guided RI's actions and use of discretionary federal stimulus funding – including GEER and SFRF. To further enhance RI's ECSP, RI will use this grant funding to conduct NAs (*see Activity 1*) which, along with past processes, will inform targeted strategic planning in areas that require deeper review. This is essential for RI to coordinate and incorporate the recommendations from these targeted efforts to enhance and update the state's existing, comprehensive ECSP. These efforts will include *Activity 2.1*: early childhood mental health planning; *Activity 2.2*: comprehensive planning for infants/toddlers, with a focus on transitions; *Activity 2.3*: Aligning developmental supports and programs; and *Activity 2.4*: further expansion planning for RI Pre-K. This is in addition to plans underway to comprehensively review the current organization of B-5 programs across state agencies. **Short and Long-term Vision:** RI's ECSP includes both short- and long-term goals. It is organized by high level objectives that are long-term in scope. The five objectives are: (1) RI's early childhood programs meet high-quality standards as defined by our Quality Rating and Improvement System (QRIS / BrightStars); (2) children and families can equitably access and participate in early childhood care, services, and supports; (3) all four-year-olds in RI will have access to high-quality RI Pre-K

inclusive of parental choice and student need; (4) secure the quality and delivery of ECCE through increased and sustainable funding and operational improvements; (5) expand the depth and quality of family and child-level data accessible to and used by agencies, programs, and partners to drive decisions. Each objective has a set of key strategies for achievement, which RI continues to iterate on during the review process. For example, for Objective 1, a key strategy includes “Ensure the workforce of early childhood educators and care professionals are professionally prepared, fairly compensated and have meaningful pathways towards career advancement.” To drive each strategy RI has short term initiatives to guide the work of the interagency ECCE team each year. To continue the workforce example, an action for 2021 included “Identify grant funding to support student loan repayment and/or supports for early childhood degrees.” This framework allows RI to have consistent high-level, long-term goals as defined by the five objectives that drive the overall direction, with flexibility to review and enhance the shorter-term strategies and initiatives to ensure they are effectively moving the state forward toward the overall vision on an annual basis.

**Scope of the Strategic Plan & Relation to Federal, State, and Local Funding:** Due to its comprehensive nature across ECCE, RI’s ECSP has driven the state’s ECCE work beyond PDG, including driving RI’s ECCE-related annual state budget initiatives, investments of federal funding, and alignment with local government. For example, in determining how best to use discretionary SFRF, RI used the ECSP to prioritize investments in ECCE. Responding to the action listed above, the state prioritized investing \$2M in SFRF to double the number of TEACH scholarships the state could support, thereby increasing access to higher education for incumbent ECCE educators, advancing ECCE quality, and ensuring equitable opportunities for the workforce.

**Timeline and Milestones for Revision and Enhancement:** RI will continue to conduct the regular, annual review and revision of the

overall ECSP. In Q1 of 2023, this will begin with an internal review and proposed changes; posting proposed updates for public comment, holding feedback sessions with the Children’s Cabinet and Early Learning Council, and opening an online feedback portal; and incorporating edits and posting a final updated version for 2023 on the Children’s Cabinet website. In addition, the plan will be updated with the outcomes of several related planning processes as they come to completion, with anticipated timeline including: *Activity 2.1* early childhood mental health strategic planning (June); pre-existing ECCE governance planning (October); Governor’s Workforce Board’s EC Workforce Report (April); and outcomes from *Activities 2.2-2.4* (November). A fully revised plan will be posted in December incorporating all new elements. **Revision of Measurable Indicators:** As part of creating the ECSP, RI developed associated measurable indicators for assessing progress on the plan. Taken together, these measures comprise the ECCE Scorecard, a series of dashboards with metrics aligned to the plan objectives, strategies, and actions (*see Activity 1 and PEPP section for further detail*). As RI conducts the annual review of the ECSP, RI will use the ECCE Scorecard data to identify areas of success to build upon and areas where further action is needed to increase equity and expand high-quality capacity across the mixed delivery system. For example, the ECCE Scorecard shows that RI has lost a significant number of high-quality licensed child care capacity since 2018, indicating that a targeted effort is needed to increase capacity overall and support lower-quality programs in advancing along the QRIS continuum; RI would incorporate actions related to this within Objective 1 of the revised 2023 Strategic Plan. In addition, as RI develops *Activities 2.1-2.4*, part of each activity’s work will be to develop a plan to assess progress and continuously refine implementation strategies. **Address needs of ECCE workforce:** RI is dedicated to comprehensively addressing the needs of the ECCE workforce, including improved

provider compensation, PD, career pathways, and other needs. Strategies related to the ECCE workforce are specifically incorporated within Objectives 1 and 3 of the ECSP, including the following: Objective 1, Strategy 3: “Ensure the workforce of early childhood educators and care professionals are professionally prepared, fairly compensated and have meaningful pathways towards career advancement” and Objective 3, Strategy 3: “Attract, develop and retain a strong workforce of qualified and well-supported educators to both build a pipeline for future expansion needs and support the current demand.” Guided by these two strategies, RI has taken action in the last two years to address compensation through implementing Pandemic Educator Retention Bonuses with SFRF of up to \$3000/annually per early educator to address compensation and increasing CCAP rates; expanding PD opportunities to support career pathways; expanding the TEACH scholarship program with SFRF to address higher education access; and investing in innovative and using PDG Renewal funds to develop accelerated higher education pathways in partnership with the OPC to address equitable access to higher education for incumbent workforce members. Many of these efforts were informed by the important workforce NA conducted in 2019 through PDG B-5 Initial and funded with PDG B-5 Renewal. To support further efforts and identify next steps, RI proposes to conduct a compensation study (*see Activity 1.2*) and RI proposes to pilot several strategies that will meaningfully support the workforce through supplemental compensation (*see Activity 4.2*), enhance articulation across higher education (*see Activity 4.3*), and expand dissemination of best practices through revising QRIS (*see Activity 4.1*). **Supporting financial stability of existing programs:** RI’s Objective 1 focuses on expanding high-quality services and Objective 4 focuses on sustainable financing, strong program performance evaluation, and system governance. Taken together, these objectives speak to RI’s focus on sustainability and quality in every decision for the B-5 system.

This has been most recently demonstrated in historic rate increases for CCAP, Early Intervention (IDEA Part C), and pediatricians as part of the state's FY23 budget. **Expand access to and increase overall participation of children, including in priority populations, with a focus on equity:** RI's Objective 1 focuses on expanding high-quality programs throughout our mixed-delivery system which will benefit children across the system. Additionally, Objective 3 in the ECSP focuses on expanding access to the state's high-quality RI Pre-K program. Objective 2 focuses specifically on increasing equitable access to high-quality programs across the mixed delivery system for priority populations, including but not limited to children from historically and systematically excluded racial and ethnic groups, children with developmental disabilities, children exposed to trauma, children facing resource insecurity, and children with mental health challenges. RI uses integrated, child-level data to evaluate the equity of access of priority populations as compared to the population as a whole (*see Activity 1 and PPEP*). RI proposes to use PDG B-5 Planning funds to enhance the ECSP in specific areas which will expand access to and increase overall participation of children in high-quality programs through *Activities 2.1-2.4: Activity 2.1: Strategic Planning to Support Early Childhood Mental Health:* EOHHS is establishing a task force to develop a plan to improve promotion of social and emotional well-being of young children as well as screening, assessment, diagnosis, and treatment of mental health challenges for children B-5. RI is in the process of recruiting a diverse group of Task Force participants, who will work with state staff, national experts from organizations such as Georgetown University and Zero to Three, as well as an in-state program manager to create a strategic plan to (1) Promote use of developmentally appropriate screening, assessment, diagnosis, and parent-child dyadic therapies; (2) Identify mental health promotion and prevention-related parenting support programs (3) Allow for effective screening, evaluation, and

treatment over multiple visits with a qualified practitioner in a variety of settings; (4) Establish a registry of trained B-5 mental health professionals; (5) Strengthen mental health skills, knowledge, and practices of all B-5 providers; and (6) Address and respond to the intergenerational effects of racism, economic insecurity, and toxic stress that influence the health and mental health of parents/caregivers, babies, and young children. In order to be accurate and effective, the strategic plan will include the participation of both children and parents in its development, and thus, RI aims to use PDG planning funds to carry out focus groups to ensure strong family voice is represented in every stage of the developing the strategic plan. The resulting plan will be added to both RI's Children's Behavioral Health System of Care plan and to the existing ECSP. These strategies will begin to be implemented in Activity 5 after completion of Activities 1 and 2. **Activity 2.2: Strategic Planning for Increased Access and Services for Infants and Toddlers:** RI proposes to develop an I/T strategic plan to address capacity and quality of child care with the goal of increasing access and equity. By federal standards, infant care in RI is unaffordable for 93% of families. While RI has made progress on supporting the child care sector as a whole and is developing an RI Pre-K expansion plan for children ages 3 and 4, a specific plan for I/T has not been developed. With rising costs to provide child care, there is no economic incentive for providers to have I/T classrooms, leaving RI families without adequate options which in turn limits families' ability to join the workforce and denies the youngest children a high-quality environment in some of the most formative years for brain development. A strategic plan with dedicated focus on I/T will assist the state to adopt a specific mission and vision that complements the RI Pre-K expansion plan and can be incorporated into the comprehensive ECSP. The plan will identify expansion and compensation strategies that will have a meaningful impact on children, families, and the I/T workforce. In

addition, the plan will have a specific focus on facilitating strong transitions for I/T to preschool age programming. RI will hire a consultant to meet with cross agency teams to develop the strategic plan and ensure broad stakeholder engagement including families and providers.

Leveraging RI PDG data, the team will explore the feasibility of strategies, such as pre-paid I/T slots, higher CCAP rates, workforce wage subsidies, I/T workforce credentials, tax incentives, and public and private partnerships. The development of a dedicated I/T strategic plan will drive future action to increase investments, professionalize the field, ensure access to high-quality care, and help to stabilize the I/T workforce. **Activity 2.3: Aligning developmental supports:**

The overall goal of this activity is to ensure all of RI's youngest learners have the services and supports to successfully participate in high-quality early childhood programs and support meaningful and successful transitions to kindergarten. In addition to IDEA Part C/Early Intervention (EI) and Part B 619 Early Childhood Special Education (ECSE) services, RI also has a range of foundational, targeted, and individualized services and supports designed to assist children with developmental needs in ECCE. For example, KIDS CONNECT provides additional staff in the child's licensed ECCE program to support social emotional needs for Medicaid-enrolled children B-5 with special healthcare needs (a priority population for RI's ECSP). Although IDEA Part C and Part B 619 have worked collaboratively over the years to support children's effective transitions, there has been a disconnect with other programs offering supportive services such as KIDS CONNECT. This results in a disjointed system of care and experience for children and families receiving multiple supports. RI proposes to conduct focused strategic planning to align the numerous and separate services to create a coordinated, comprehensive, and seamless system of support that will ensure that each child receives the timely, targeted assistance they need to successfully participate in high-quality early childhood

programs and enter kindergarten ready to continue their educational journey. A significant focus of this project will be to explore potential changes to the current KIDS CONNECT certification standards and practices to better coordinate with EI, ECSE, and other supports and services. With the overall goal to increase child care center participation in KIDS CONNECT with more streamlined standards including service delivery, billing/payment procedures and aligned PD. Children's service plans should be aligned across all developmental support services. To achieve this goal, a consultant will facilitate a state-level workgroup that includes representation from state agencies, early childhood programs, and families. The workgroup will be responsible for numerous goals including: (1) reviewing and aligning existing systems and support (2) identifying duplications and gaps in the current system; (3) recommending modifications and new initiatives; (4) developing a PDTA plan; (5) creating a clear implementation and evaluation plan. In addition, RI will pursue deeper strategic planning related to Pre-K expansion. **Activity 2.4: RI Pre-K expansion planning:** This activity will allow RI to achieve equity and access, including exploring the incorporation of family child care in RI Pre-K. As one of only six state preschool programs in the country that meets or exceeds the nation's highest quality benchmarks as measured by the National Institute for Early Education Research (NIEER), RI Pre-K is a model of high-quality preschool programming both within RI and nationally. Objective 3 of the ECSP is for all four-year-olds to have access to high-quality RI Pre-K, inclusive of parental choice and student needs. The FY23 state budget required RI to develop a plan that would accelerate the growth in Pre-K expansion and incorporate the addition of three-year-olds. A cross-agency team, along with stakeholders, has begun to draft a plan to meet this goal. RI proposes to use engage expert support to conduct deeper analysis in Pre-K expansion planning to address (1) developing a model for Family Child Care to become part of the mixed-delivery

system of RI Pre-K; (2) supporting creation of a pipeline of providers ready to deliver RI Pre-K; (3) deeper geographic modeling of RI Pre-K expansion based on facilities and quality readiness and population growth factors and; (4) provide options for coordination of ECSE services to allow RI Pre-K students to participate in programs outside their district of residence; (5) support transitions for children as they enter kindergarten.

**Address other key priorities in ECCE based on NA findings:** RI has a proven track record of using PDG NAs to drive the development and refinement of the ECSP. For example, the 2019 Facilities NA for early learning identified gaps in financing to develop quality space for ECCE. As a result, RI created a 2021 ballot measure to invest \$15M in ECCE facilities, a first-of-its-kind bond measure for the state. Similarly, after the family NA from 2019 identified a lack of support to navigate B-5 services, RI leveraged the PDG B-5 Renewal grant to pilot community-embedded family navigators to connect families to the B-5 system. Going forward, RI is committed to using NA findings from *Activity 1* to drive future strategic planning and action.

*Activity 1.2* will lead to recommendations regarding opportunities to improve compensation for the ECE workforce, which will drive new components of the strategic plan to support workforce. Similarly, *Activity 1.1* will lead to recommendations that support MLLs in ECE, which may lead to changes to PD opportunities, quality ratings, and career pathway curriculum within the ECSP. These will be reviewed and incorporated into the ECSP in Q3 when the NAs are finalized.

A key area for strategic planning is addressing the identified need for improved transitions for children across ECCE programs and into elementary school. Transition supports has been a key finding for support from the development of a comprehensive RI Pre-K expansion plan. As a result, *Activity 2.1* will include a substantial focus on I/T transitions to preschool programs and *Activity 2.2* will include a significant focus on transitions and coordination across programs for

children with developmental needs, including but not limited to IDEA Part C and Part B 619. This will build upon RI's PDG B-5 Renewal funded work to enhance transitions from preschool to elementary school through district-based kindergarten transitions planning grants, which have supported 13 of 36 school districts in developing community-informed, mixed-delivery wide transition planning for children entering elementary school. **Collaboration, coordination, and partnerships:** The ECSP includes a specific focus on coordinated governance. Through the Initial PDG B-5 in 2019, RI established a new interagency Governance structure and through PDG Renewal RI has invested in implementing and improving this structure. The structure has proven highly effective, as it has allowed for continued coordinated action on ECCE priorities across state agencies even in times of leadership change. RI's ECSP is overseen by the ECCE Governance Committee – comprised of the Governor's Cabinet members representing the agencies that oversee CCDF, Part C, Part B 619, Pre-K, child care licensing, MIECHV, family visiting, Medicaid, and Head Start Collaboration. The plan is implemented by an interagency team of staff leads from each of the agencies represented on the committee (see *Organizational Capacity*). In addition, ECCE Governance establishes priority workstreams each year and charters interagency teams to achieve specific goals. The governance structure is coordinated and driven by the ECCE Governance Coordinator / Director of Early Childhood Strategy. As a result of the coordination and collaboration of this governance structure, RI has achieved one of the largest expansions of RI Pre-K in a single year, through braiding, blending, and layering federal and state funds and successfully advocated for one of the most robust state budget investments in ECCE in recent memory for State Fiscal Year 2023. The ECCE Governance Committee is a subcommittee of the Children's Cabinet, which is advised directly by the State Advisory Council (known as the Early Learning Council, ELC), the RI Parent and Caregiver Advisory Council

(P/CAC), and the RI Family Visiting Council. These advisory bodies engage providers, stakeholders, and families across the ECCE system and create a dynamic opportunity for partnerships and collaboration across all levels of the ECCE system. While this system has led to important advancements for ECCE, there exist ongoing barriers and roadblocks. For example, oversight of funding streams remains separated across state agencies, creating barriers to enhanced coordination and shared decision-making. In addition, providers must engage with several different state agencies to deliver and run key ECCE programs, creating potentially unnecessary burdens on the system that prevent expansion of and increased coordination of services for children. In 2023, RI will be pursuing a comprehensive review of ECCE governance structures as required by the FY23 budget – this effort will be facilitated by the Children’s Cabinet and ECCE Governance Coordinator and led by an interagency working group of state leadership and the Executive Director of RI Kids Count, the leader of a vital children’s advocacy organization and co-chair of the ELC. The findings from this ECCE governance review process will be delivered in October 2023 and the recommendations will be incorporated into the ECSP. This ECCE governance system analysis process is one of the targeted strategic planning processes that RI will pursue during this PDG grant period and will inform the enhancement of RI’s comprehensive ECSP. Recommendations from this planning process may impact RI’s

*Activity 5. Meaningful engagement, with focus on those who have been traditionally marginalized:* RI is dedicated to meaningfully engaging communities and families in decision-making for ECCE. RI’s PDG B-5 Renewal Grant supports the Parent / Caregiver Advisory Council (P/CAC), which is comprised of families with children in home visiting programs and whose chair and vice chair are both parents. Staff from RIDOH support the group, but it is run entirely by families, with families setting the agenda, weighing in on direction, and identifying

actions for the group. RI state staff brings key decisions for discussion and advice to this group, such as the ECCE Strategic Plan revisions, the expansion of RI Pre-K, and the approach to public engagement and outreach. In addition, RI partners actively with community-embedded organizations such as Parents Leading for Educational Equity (PLEE) and RI Kids Count. These organizations provide translation supports for families who speak languages other than English to participate in public meetings, and RI regularly partners with PLEE to support family feedback and discussion on ECCE priorities. To revise the ECSP and for each of *Activities 2.1-2.4*, RI will engage with families directly through the P/CAC, PLEE, and through public meetings held at times and locations that are convenient for family access. In addition, RI is committed to increasing access through holding all meetings in a hybrid format (i.e., on Zoom and in person) as that has enabled more individuals to participate in public forums and provide feedback. RI will continue to leverage the state’s Early Learning Council and DHS-run all provider meetings to engage additional stakeholders in the ECSP process (*see Stakeholder Engagement section*).

### **Activity 3: Maximize Parent and Family Engagement in the B-5 System**

RI is dedicated to supporting families through timely, targeted, and quality supports and information in a culturally and linguistically responsive manner. Parents are the first – and often the most important – educator in a child’s early life. Family knowledge and choice in RI’s mixed-delivery system remain central to the work to the implementation of our ECSP and use of PDG Renewal funds. While RI has made notable progress on family engagement, the state seeks to more meaningfully incorporate families into the decision-making processes for the ECCE system to ensure that policies and priorities meet family needs. In addition, RI wants to empower families to know about and make use of the options available for their families. Using PDG

Renewal funds, RI has invested in several initiatives that support this work, including: (1) the Parent / Caregiver Advisory Council (P/CAC), (2) public awareness campaign, (3) coordinated eligibility and enrollment work, and (4) funding to Health Equity Zones (HEZs). Together these efforts have enabled more family involvement in RI's ECCE system and provided a range of opportunities for family engagement to meet different cultural and linguistic needs. In addition to engaging directly with families, RI continues to work with organizations that have strong partnerships with their communities and families (*see Stakeholder Engagement section*). Through PDG Planning, RI proposes to grow opportunities for family engagement in decision-making (Activity 3.1), invest in community-driven outreach and engagement to support access to high-quality early learning opportunities (Activity 3.2), and work with families to co-develop a revised lottery and application process for RI Pre-K that maximizes access and choice (Activity 3.3). Together, these proposed activities will advance RI's vision – incorporated in the ECSP in Objectives 2 and 4 – to meaningfully engage families in governance and to center family choice and access throughout the system. **Family Voice in Key Policy Decisions:** RI has worked to elevate and center family voice through NAs and through facilitated advisory groups that engage directly with ECCE Governance. From RI's 2022 NA, the state has updated insights about family experience in child care, which also shows some of the impacts of COVID-19. This survey focused on ECE usage, cost, and barriers. From this data, the state has more information about challenges that families face, including that 37% of respondents reported cost and/or structural barriers to finding child care. In addition, 45% of all families reported that finding or paying for child care has ever prevented adults from working or attending school. Families also shared what they would change about their current child care arrangements, with the most common answer being the hours of care available. These data underscore the importance of

family engagement and choice in RI's B-5 system, as families know best what needs to change and improve. In addition, RI's P/CAC serves as a part of RI's ECCE Governance structure, bringing together caregivers engaged in long-term family home visiting models and providing a venue for authentic caregiver engagement with state policies and priorities. RIDOH has developed this Council, based on best practices, and ensured that families and caregivers are chairing and leading the group. The Council determines what topics are most relevant and RIDOH staff support their planning efforts. This model has created an authentic leadership opportunity for families and caregivers across the state. The P/CAC provides valuable feedback on various priorities, including family survey questions, the ECSP, and various public awareness campaign materials. Their engagement and commitment have been invaluable for the state and RI plans to replicate this model in other venues to build more opportunities for families to participate as decision-makers within the ECCE system. **Activity 3.1 Building parent and caregiver power within ECCE governance:** RI is dedicated to centering family voice in all decisions in ECCE. To date, RI has made progress through PDG B-5 Renewal in developing the parent-run P/CAC. RI wants to build upon this success and use the P/CAC model to expand opportunities for parent leadership as well as more directly engage families in policy decisions. A key feature of the existing P/CAC is that participants, rather than state staff, are leading and driving conversation topics and decisions. RI proposes to use funding to invest in supporting additional family councils both facilitated inside and outside of government that enhance family voice, with an emphasis on leveraging the P/CAC model to ensure participant ownership. In particular, RI will prioritize family groups that meaningfully engage families from priority populations – such as families with child welfare involvement – to elevate voices that are often not at decision-making tables. By empowering parents to be the group leaders, each group will

be able to develop self-determined norms to create inclusive, culturally responsive spaces. RI will provide supports for groups to invest in leadership training opportunities, provide language access and translation supports, facilitate meetings, provide honorariums, and ensure families can engage successfully by removing barriers such as transportation and child care. These councils will be an important piece of the governance of ECCE, engaging in the strategic conversations and decision-making process regarding ECCE investments, policies, and programs. **Timely, Accurate, and Accessible Information for Families:** RI continues to improve information accessibility and availability for families about early childhood programs. With PDG Renewal funds, RI created and updated a consumer website and a general early childhood landing page (kids.ri.gov). The kids.ri.gov site allows families to access information about the wide array of services available for children by age and links to resources throughout state government. The consumer website provides up-to-date information about child care programs in RI, including QRIS star ratings, ages served, setting in the mixed delivery system, accreditations, and whether CCAP is accepted. In addition, RI's PDG Renewal-funded public awareness campaigns have focused on timely topics where families expressed needs for more information, such as re-engaging with pediatricians following the pandemic, finding child care providers as programs reopened, and applying for the RI Pre-K lottery when the application window opened. For every campaign, RI prioritizes investing in both English and Spanish campaigns and ensuring all images reflect the cultural and racial diversity of B-5 families in RI. **Activity 3.2 RI Pre-K Family Ambassadors:** Each year, RIDE's early learning team provides tremendous support to families applying to the RI Pre-K lottery – helping thousands of families understand the application and answering questions specific to each family's unique circumstance. RI has used PDG Renewal funds to support these efforts by investing in English and Spanish social media

campaigns to let families know about the program and link families to the application. However, family stakeholders have identified that a more robust, community-embedded outreach approach is needed. RI proposes using PDG funds to pilot a RI Pre-K ambassador program by providing small stipends to parent leaders and community-embedded partners with personal experience with or deep knowledge of the RI Pre-K program to communicate with families and support families with the application process. Ambassadors would receive trainings from RIDE staff and be responsible for engaging in community events to share information about RI Pre-K, answer questions about the program and families' unique circumstances, and encourage and support families to apply during the lottery. This would allow for additional cultural and linguistic representation and supports for families who otherwise may struggle to access services. By engaging community-embedded ambassadors, this program will ensure that programming is directed by families and is responsive to the needs of prospective families. This concept is modeled on RIDE's successful community ambassador program for career and technical education pathways for middle- and high-school age youth. **Nurturing Family / Child**

**Interactions:** RI is committed to supporting the family / child relationship. Using PDG Renewal funds, RI has invested in family programming at Health Equity Zones (HEZs) through piloting Family Navigators and family support programming, including evidence-based practices such as Incredible Years. The emphasis of the PDG Renewal funded programs has been on engaging families within the ECSP priority populations and on implementing an inter-generational approach, supporting both child and caregiver individually and as a dyad. In 2021, more than 1,500 RI families received supports and services at HEZs. This has allowed families to engage in nurturing relationships with their young children while gaining additional knowledge and skills. PDG Renewal funds also support trainings for early childhood staff to offer responsive,

supportive programming to families. Additionally, RI continues to invest in evidence-based family home visiting programs, which provide critical supports to our youngest families. RI has both federally funded Maternal, Infant, and Early Childhood Home Visiting (MIECHV) models, as well as a short-term program called First Connections, which may also refer families to MIECHV programs. Home visiting consistently demonstrates the benefits of investing in strong family and child interactions. As part of this PDG planning application, RI is also considering how to support early childhood mental health (*see Activity 2*). RI's proposed *Activity 3* initiatives will continue and build on the successes of these existing, coordinated efforts to further maximize parent choice and access to the mixed delivery system for children B-5 and to engage families in the education and development of their children, with an emphasis on strong relationships between family and children.

**Family Centered Application Practices & Meaningful Family Engagement in Children's Care and Education: Activity 3.3 Pre-K Lottery Design Review and Initial Implementation:**

RI's ECSP includes an objective to reach universal preschool, with a more immediate goal of reaching 5,000 seats by 2028. The existing 2,364 RI Pre-K seats are awarded through a lottery process facilitated by RIDE. The state's current system does not meet the needs of a growing RI Pre-K program and limits families' ability to engage in the application process. It is an antiquated system that requires hours of human interaction to maintain and support families' interaction with the system. As the RI Pre-K program expands, and begins including 3-year-olds, the current system does not have the capacity and capability to run concurrent lotteries for different ages or manage complex requirements such as sibling placements. RI proposes to use PDG funds to plan for an updated lottery system, leveraging national research and best practices, to understand the functionality needed to support an equitable, easily accessible lottery system.

In this discovery phase and planning, RI will center families to ensure that the application and lottery is intuitive for families, which is a key component of ensuring that families have strong engagement and choice in their child’s early learning program. The state will conduct RI Pre-K family focus groups, engage with family councils, and host community forums to capture family feedback and recommendations on ways to improve the lottery application and process. RI will consider ways that the lottery system incorporates 3-year-olds and allows for the integration of 3- and 4-year-olds to ensure that families can use one lottery system. These advances will increase family choice and access as RI Pre-K expands.

#### **Activity 4: Support the B-5 Workforce and Disseminate Best Practices**

RI is committed to supporting the B-5 workforce and improving the availability of high-quality programming through disseminating best practices to educators and providers. As noted in *Activity 2*, RI’s ECSP includes specific goals to ensure the workforce is professionally prepared, compensated, and has meaningful pathways towards career advancement, as well as to increase the availability of high-quality care. RI has made significant progress in addressing the needs of the workforce and disseminating best practices through prior PDG opportunities, but the pandemic has fundamentally changed the ECCE system. With substantial educator turnover in the field, decreased child care capacity, and increased risk factors for children’s mental and behavioral health, it is imperative that RI build capacity and pilot new practices that will address the new landscape. RI proposes *Activity 4.1*, a review of the state’s Quality Rating and Improvement System (QRIS) to align with national best practices to ensure that RI’s rebuilding work is rooted in the latest research; *Activity 4.2*, a pilot of direct supplemental compensation for workforce members with qualifications aligned to QRIS to support retention of high-qualified

educators; and *Activity 4.3*, increased articulation supports at institutions of higher education (IHE) to accelerate career pathways for educators.

**Needs of ECCE Workforce:** RI's most recent NAs regarding workforce – the 2019 PDG-funded workforce NA, the Head Start Wage Comparability study, and a higher education pathways NA conducted by OPC – have all emphasized long-standing concerns: (1) lack of adequate compensation, leading to high turnover, low recruitment, and low incentives for career advancement and (2) unaligned higher education pathways that are inaccessible for educators working full-time. RI has acted in response to these findings by incorporating strategies and initiatives into the state's ECSP and leveraging PDG Renewal, SFRF, and GEER to invest in these strategies. To address compensation, RI leveraged SFRF to invest in retention bonuses for the entire early educator workforce, paid directly to educators (*see Activity 4.2*). In addition, RI is proposing *Activity 1.2* to evaluate the current state of compensation and *Activity 4.2* to pilot a tiered supplemental bonus program aligned to educator qualifications. To address career pathways, RI has taken a multi-pronged approach, which has included: developing innovative and accelerated higher education pathways for incumbent educators; doubling the number of TEACH scholarships available to support access to higher education pathways; and developing alternative pathway approaches, such as using PDG Renewal funds to pilot an I/T Registered Apprenticeship program and partnerships with career and technical education providers. *Activity 4.3* is aligned to ongoing efforts to address higher education access and will address significant gaps in articulation across IHEs. **Supporting and disseminating best practices:** RI funds more than \$6M in professional development and technical assistance (PDTA) support to the ECCE workforce. The majority of this PDTA is braided through the state's PDTA Hub, the Center for Early Learning of Professionals (CELP). This Hub was developed in 2014 through the Race to

the Top Early Learning Challenge (RTT-ELC) grant. RI's Child Care Licensing Regulations require individuals employed in child care settings to complete a standard set of hours of state-approved PD. All PDTA designed and delivered through this Hub is evidence-based, aligned to the state's RI Early Learning and Development Standards (RIELDS), BrightStars (RI's QRIS), and RI's ECE Workforce Knowledge and Competencies (WKC). State-approved PD is required to incorporate recent resources and evidence-based practices for supporting the state's most vulnerable populations, including trauma-informed approaches to address adverse experiences and approaches to inclusion of children with disabilities. PDTA is delivered in person, online and in classrooms, and has been designed to reflect best practices in adult learning. Over the last three years, RI has advanced the dissemination of best practices through PDG Renewal efforts, including developing the Early Childhood Mental Health Consultation model, Child Care Health Consultation model, pre-service training modules, and the I/T registered apprenticeship program. Through stimulus funding, RI has invested in developing a workforce registry that will allow RI to capture real time information about the current types of credentials and degrees in the field and allow RI to target outreach for new PDTA opportunities to individual workforce members based on their educational attainment and career stage. In addition, RI has invested in the practice-based coaching LearnERS model which is an evidence-based PDTA training approach with embedded mentoring/coaching to support educators in increasing quality through the lens of the evidence-based Environmental Rating Scale Tool. To continue to advance sharing of best practices and increasing the quality of providers, RI proposes **Activity 4.1: ORIS Evaluation and Enhancement**: RI's QRIS is aligned across ECCE settings and is the measure of quality for center-based child care (including Head Start), local education agencies (LEAs), and Family Child Care (FCC). QRIS is one of the foundational elements of RI's ECCE system as it drives

PD and technical assistance offerings for the workforce; but QRIS has not had a substantial, data-driven evaluation since 2014. Since then, the landscape of child care, both locally and nationally, has dramatically changed as a result of the COVID-19 pandemic. Families are accessing care differently, programs are struggling to find qualified staff, and staff are facing the long-term impact of the pandemic in their day-to-day work. In addition, national experts such as the BUILD Initiative recommend reconsidering approaches to QRIS that more effectively align quality standards across state systems, simplify the components, and incorporate families' input on quality. As RI works to recover from the pandemic, it is vital that the state enhances and streamlines quality improvement systems to promote ECCE provider participation in quality activities and ensures quality measures are meaningful to families. Strong alignment between QRIS and other ECCE standards such as Workforce Knowledge Competencies and Comprehensive Early Childhood Education standards will support more streamlined and effective TA, PD, and higher education opportunities for the workforce. RI proposes an expert evaluation of the current RI QRIS through an impartial third party with experience in the field. This evaluation will include a comprehensive comparison of BrightStars to other states' QRIS including a thorough review of national, evidence-based best practices, RI stakeholder interviews, and review of 2022 family NA findings of family-identified markers of quality. An external evaluation will allow RI to understand what substantive changes may be needed to align with national best practices and provide RI with a path for comprehensive and cohesive revision. To ensure dissemination of best practices, RI is focused on ensuring that the foundational measures of quality are research-based and meaningful to providers and families.

**Efforts and strategies to improve training and experience of the B-5 ECCE providers:**

**Compensation strategies:** COVID-19 exacerbated a long-standing issue in ECCE: that the

essential early educators who support young children are under-compensated. As wages rise in other fields, and the demands on ECCE educators grow with increased behavioral and mental health challenges for children B-5, the ECCE sector is struggling to attract and retain staff. To support the ECCE sector in attracting and retaining staff in a competitive economy – as well as to honor the essential work undertaken during the pandemic -- RI invested \$34.7M of SFRF into the Pandemic Retention Bonus (PRB) program, providing up to \$3,000 in bonuses annually to all educators who stay in the field at intervals throughout the year. With a 16.0% increase in applicants between the first and second application window, the preliminary data from PRB indicates effectiveness in attracting and retaining ECCE educators. **Activity 4.2 ECCE**

**Workforce Direct Supplemental Compensation Pilot for Educators with QRIS-Aligned**

**Credentials:** Building on the PRB, and RI Early Learning Council’s 2019 recommendations, RI proposes to fund a demonstration project with tiered, progressive wage supplements paid directly to educators based on their qualifications. This pilot framework was developed as a recommendation through a task force of RI state advocates, ECCE providers, and state agency representatives. Modeled on the nationally recognized and evidence-informed Child Care WAGE\$ program, RI proposes to pilot providing a tiered bonus to educators working in priority areas, such as infant/toddlers, programs with 1-3 star ratings on QRIS, and FCC. The bonus amounts will be higher for educators with higher credentials and will be aligned to RI’s QRIS, which requires educators to have a Child Development Associate’s (CDA) (or equivalent college credit) at three stars and Associates (AA) and Bachelors (BA) degrees at four and five star ratings. As a result, educators who have a CDA or equivalent, an AA, or a BA degree will be eligible for bonuses. Aligned with the WAGE\$ model, RI will also review transcripts and will honor post-secondary credits in ECCE field. This program will provide direct compensation to

educators and support retention of highly-qualified educators in the field. RI estimates providing an average award of \$5,000 to approximately 335 educators, based on credentials and relative size of the applicant pool at each tier. As a pilot program, Activity 4.2 will allow RI to gather data about the efficacy of tiered, direct bonuses in retaining educators in the field. In addition, the pilot will demonstrate RI's commitment to advancing compensation in the field and potentially motivate more child care staff to earn credentials and support ECCE programs in recruiting new educators with early childhood credentials to work with infants and toddlers. The pilot will also demonstrate RI's commitment to the infant/toddler sector and -- building on Activity 2.2 -- serve as a foundation for addressing the limited capacity of infant/toddler care by helping to retain a high-quality workforce. **Trauma-informed approaches:** RI's IHE's have embedded trauma-informed care into their curriculums to ensure RI's B-5 educators are trained to provide evidence-based high-quality care and education. In addition, CELP offers PD related to trauma informed care across all ECCE mixed delivery settings and RI Pre-K has invested in Conscious Discipline training across all their classrooms. Expanded trauma-informed approaches and trainings may be a key recommendation from Activity 2.1 that RI may implement within Activity 5. **Inclusion strategies:** RIDE developed the Itinerant Early Childhood Special Education Model (RI-IECSE) which includes PDTA surrounding best practices related to the inclusion of children with disabilities. The model supports young children with disabilities to actively participate in all classroom-based activities by working with general education teachers to embed the necessary supports and services into students' everyday routines and learning environments. This training supports educators and children with disabilities in the classroom is embedded into RI Pre-K requirements and other ECCE and ECSE providers are encouraged to participate. **Supports to limit suspension and expulsion:** RI has a no suspension and expulsion

policy for young children as outlined in our CCAP policies in procedures in accordance with ACF guidelines. Additionally, RI allocates CCDBG quality improvement funds for PDTA, including effective behavior management strategies and training. There are also several programs to support providers to avoid this practice, such as KIDS CONNECT, which support children with challenging behaviors to be successful in the classroom (*see Activity 2 for more details*). Additionally, as a prevention and intervention strategy, RI has the SUCCESS program, which is a CCDBG-funded service that pairs early learning programs with Early Childhood Mental Health Consultants to support the social, emotional, and behavioral health needs of identified children. SUCCESS ensures that programs have experts to turn to for support and that families get connected with services across the ECCE system.

**Workforce competencies:** RI developed the Workforce Knowledge and Competencies (WKC) for the ECCE workforce to clearly articulate the required competencies needed in various ECCE positions. These competencies are aligned to and evaluated through BrightStars and all PD opportunities at CELP are aligned to and indicate the WKC level they are intended for. Additionally, HS and RI Pre-K programs also use the CLASS tool to assess teacher competencies. Given that national best practices outlining the developmental needs of young children have evolved, through PDG B-5, RI revised and is working to update the Rhode Island Early Learning and Development Standards (RIELDS), which serve as the developmental foundation that educators can access to support implementation of best practices within programs. Through Activity 4.1, RI will work to identify potential changes for QRIS and, as a corollary, will identify any needed updates to the WKC.

**Strengthen linguistic and culturally supportive career pathways:** RI is strengthening the career ladder and pathways through work led by OPC (*described in Activity 2*). A key priority

emerging from the work is the need for linguistically and culturally supportive pathways. As a result, RI has invested in developing Spanish-language higher education coursework that includes embedded English-language support in the instruction. In addition, RI supports FCC providers through the SEIU Education Service Fund to develop and implement coursework that is culturally and linguistically accessible for FCCs, the majority of whom speak a language other than English. Currently, one of the higher education pathways being developed includes providing recognition for foreign credentials, an important priority for RI to attract and retain diverse educators, particularly from the state's vital immigrant community. Another priority is to enhance articulation across IHEs, ensuring incumbent educators – who are disproportionately women of color in RI – have accelerated pathways to advancing their degrees and career options. In RI, similar to all states, historic and systemic barriers to accessing quality early childhood and K-12 education – as well as the historically prohibitive costs of higher education – have systematically excluded people of color from accessing higher education. As a result, RI is proposing Activity 4.3 to accelerate pathways in higher education for ECCE educators. **Activity 4.3 Higher Education Articulation Support:** Degree completion for early educators can be elusive due to, in part, barriers to capitalizing on their professional experiences and previous college education. Transfer and Prior Learning Assessment (PLA) services at each institution of higher education (IHE) vary. RI intends to build collaboration among the IHEs and to join program segments and sectors to provide a more accessible and equitable transfer and PLA system to move students from one institution to another. This work will include hiring an experienced transfer and PLA professional who will work to understand and communicate the needs of those entering or reentering higher education; gain course recognition across IHEs; ensure equity and access; and coordinate participation across multiple education and community

partners. The process will ensure parity among institutions and students while faculty maintain primary responsibility for developing transfer and PLA articulation agreements for program majors and significant courses. The project will support the expansion, coordination, alignment, and development of a transfer portfolio and prior learning assessment projects while ensuring equity and increased accessibility in awarding credit.

***Strategies to increase availability of qualified providers:*** Like other states, RI lost significant ECCE capacity in the pandemic, with the most significant decreases occurring from the loss of providers with lower-QRIS ratings and Family Child Care providers. RI lacked sufficient capacity for all children to attend ECCE before the pandemic, and the decreased capacity has made access to infant/toddler care and FCC even more difficult. RI is committed to increasing availability of qualified providers and has invested \$0.6M in SFRF to fund start-up grants for up to 200 FCC providers. Through this program, individuals interested in starting an FCC can receive \$2,000 in start-up costs to support purchasing materials, curriculum, or other necessities and have access to specialized PDTA to ensure that they begin their FCC at a high-quality level. In addition, RI is incentivizing quality by continuing to invest in tiered reimbursement for CCAP aligned to the QRIS and has raised CCAP rates several times in the last four years. Through new funding models for RI Pre-K developed in 2021, RI is now able to braid state Pre-K funds with Head Start funds to bolster HS classrooms and increase access to HS for vulnerable populations. Given RI's small size, there are no rural areas in the state as defined by federal standards, but there are child care deserts with no high-quality (as rated by QRIS) ECCE provider in particular communities. RI is using the \$15M bond funding to invest in facilities development and prioritize geographies that are child care deserts, with a goal of ensuring all communities have access to high-quality care. In addition, RI is connecting ECCE providers to the broader B-5

system and healthcare system through Medicaid's social determinants of health e-referral system, allowing ECCE providers to refer families to services and supports such as housing assistance, family home visiting, and other key child and family services. RI has also leveraged PDG Renewal to pilot and strengthen shared services, such as a child care health consultation service and the early childhood mental health consultation model. Taken together, these strategies will increase capacity of high-quality ECCE programs, stabilize funding for Head Start to ensure continued and increased access for vulnerable children, and support ECCE providers to have supports needed to address health and social determinants of health.

**Implementation:** The implementation of activities will be the responsibility of assigned project leads within each state agency. The project leads serve as designated members of the ECCE Governance team, which work collaboratively to achieve goals as set forth by the ECSP. Each project lead sits in a leadership role within their respective state agency and is directly responsible for the implementation of the proposed activities in accordance with state purchasing policies for activities that will be completed in collaboration with a qualified vendor. The timeline for implementation and key milestones are both noted in the *Project Timeline and Milestones* section. As RI has previously demonstrated in former PDG funding, the project leads will engage in any workforce-related TA efforts available. RI anticipates that the PDG Grant Manager will participate in optional peer learning TA and will be responsible for engaging RI team members across state agencies as needed to support efforts at the state level. **Systemic and Community/Program Level Supports:** *Activities 4.1-4.3* together create systemic supports for the B-5 workforce and support providers at the program and community levels. *Activity 4.2* will directly support the existing highly-qualified workforce in compensation as well as provide RI with meaningful data to identify future, targeted approaches to increasing retention moving

forward. This work will support ECCE providers at the community/program level by incentivizing the retention of highly-qualified educators. This pilot will serve as an initial step in addressing wages for the workforce, while the completion of an ECCE wage and compensation study (*see Activity 1.2*) will provide the necessary data to approach compensation from a system's level and strategically plan to move the needle. *Activity 4.3* will support current B-5 workforce members in accelerating pathways through higher education by supporting articulation across IHEs, systematically reducing the cost and time burdens of pursuing higher education. This supports the community/programs to increase program quality, access higher CCAP reimbursement rates, and – most importantly – deliver higher quality instruction and support to children in ECCE. *Activity 4.1* addresses program level supports and dissemination of best practices by ensuring that RI's QRIS is as simple, meaningful, family-centered, and current as possible. Given the stresses of the pandemic, it is vital that as programs build back, the pathway to achieving quality is clear, accessible, and based on the latest research. The proposed activities will position RI to support the B-5 workforce through the dissemination of best practices targeted to combat system level changes that have occurred as a result of the COVID-19 pandemic and increase the availability of high-quality ECCE.

#### **Activity 5: Support Program Quality Improvement**

**Assurances:** RI will complete Activities 1 and 2 prior to beginning Activity 5.

**Leveraging findings of NA and strategic plan to improve quality and services:** RI has a proven track record of acting on the results of PDG B-5 and other early childhood needs assessments and strategic plans. RI anticipates using the outputs of Activity 1 and 2 to drive future work to improve the quality and equitable provision of services for children, with a focus on priority populations. Currently, RI is enhancing quality through investing in providers,

educators, and facilities. Each of these current activities was informed by the NAs and ECCE Strategic Plan developed through the PDG B-5 Initial and Renewal processes (*see Activities 1 and 2*). **Providers:** using \$1M in SFRF, RI has targeted additional quality supports – including dedicated TA and coaching, curriculum purchases and training, formative assessment, etc. – for ECCE providers across the mixed delivery system to advance along the quality continuum. In addition, RI is using CCDBG ARPA funds and PDG funds to invest in practice-based coaching LearnERS model, a TA opportunity for educators and programs to participate in no-stakes Environmental Rating Scale (ERS) assessments and learn how to improve practice (informed by 2022 ECCE Scorecard). **Educators:** Using \$2M in SFRF, RI is enhancing quality by doubling the number of TEACH scholarships available so incumbent educators can advance their degrees (informed by 2019 PDG-funded workforce NA). **Facilities:** RI invested \$15M in early learning facilities through a bond measure in 2021, supporting mixed-delivery providers to expand or enhance facilities to meet quality standards (informed by 2019 PDG-funded facilities NA). Providers were ready to apply for the bond after several rounds of facilities planning grants funded by PDG B-5 Renewal support providers in conducting pre-analysis work, such as architectural studies. **Approach to planning and implementing quality improvement activities:** RI anticipates leveraging the existing process for annual updates to the RI ECSP to successfully plan and implement activities to improve quality. After the ECSP is updated, RI does an annual prioritization of interagency workstreams, and charters working groups to develop and drive forward new projects. The project charters identify the project lead and project team, relationship to the ECSP, goals, key deliverables, timeline, measurable outcomes, and stakeholder engagement plan. This charter becomes the foundation of the ECCE Governance review and oversight of interagency collaboration, enabling cross-agency teams to function

effectively with a clear mission. After Activity 1 and 2 are complete, RI will charter activities that address findings from Activity 1 and 2 for ECCE Governance review and approval for implementation. **Anticipated activities to improve quality:** RI will have approximately 2-3 months to implement Activity 5 given RI's anticipated timeframe for Activities 1 and 2. RI is committed to acting on all findings, but through this funding opportunity, the state proposes to specifically invest in enhancing early childhood mental health supports in the state. This proposed Activity 5 project is feasible in the timeframe RI anticipate having for Activity 5. All other actions will be part of RI's ongoing work to address continued development of the B-5 system and support sustainability and quality improvement. **Activity 5.1: Early Childhood Mental Health Task Force Implementation:** Building on the recommendations from the early childhood mental health task force work (*see Activity 2.1*), RI anticipates investing in the recommendations from this report. Preliminarily, this would include identifying and training pediatric health providers on a new set of mental health screening aligned with the recommendations. Funding would be used to support pediatric health providers to adopt and learn new tools to incorporate into their regular screening practices. As RI has among the highest rates of children covered by health insurance in the country at 98.1%, this would be a vital step to reaching universal mental health screening for infants and toddlers. Through early, universal mental health screening for young children, RI would be positioned to improve developmental and social-emotional by referring children to needed services earlier than is currently available. Another potential use of funds would be to pilot a workforce registry platform that would verify and publish lists of professionals who have completed the requisite mental health training. This would support families in identifying providers to seek out for support with mental health behaviors as well as pediatricians in finding providers to refer families to after conducting

screening. Finally, RI anticipates that *Activity 2.1* will identify key PDTA opportunities that should be disseminated across the B-5 system to develop shared understanding and language of early childhood mental health across all B-5 partners. RI proposes to use funding in Activity 5 to develop and fund initial trainings that are accessible for all B-5 partners, including but not limited to early educators, family visitors, EI and ECSE professionals, and community health workers. **Support and strengthen statewide professional development, with goal of ensuring high-quality programming for families representing priority populations:** RI anticipates that key findings from *Activity 1.2* will drive the state's work to support and strengthen the workforce. RI anticipates that the study will identify strategies and opportunities to better retain staff in early education by providing information on current compensation and what is needed to be competitive. This information will enable RI to take a targeted approach to recruiting and retaining workforce members, such as through novel benefits opportunities that meet the identified need. RI will focus new pilots for workforce on programs that serve priority populations, with a focus on children from low-income families and children with disabilities, to ensure children in priority populations benefit from educator consistency and expertise. In addition, the findings of *Activity 1.1* MLLs will identify new opportunities to support language inclusive classrooms and implement best practices for MLLs. These best practices will be disseminated through resources as identified in *Activity 1.1* and incorporated into future expectations for high-quality classrooms in RI Pre-K and in QRIS. RI will also prioritize recruitment of workforce who are multi-lingual into ECCE and provide language-inclusive higher education pathways, building on the work already underway (*see Activity 4*).

RI consistently hears from the workforce that a top need is for supports in managing and addressing challenging behaviors in early childhood classrooms, particularly in the wake of the

COVID-19 pandemic. *Activity 5.1* will support statewide early learning professional development by aligning training across all segments of the B-5 system and providing a usable, consistent practice for B-5 professionals. This will allow early educators to have shared language and practice with others who are working with families, such as family visitors. In this way, B-5 professionals will be better positioned to work as a team to support families and children with mental health needs. In addition, it will provide early educators with the tools they need to manage classroom behavior, which will relieve them of stress that could be a precipitating factor to educators leaving the field. **Impact of quality improvement activities on access to high-quality care:** *Activity 5.1* will increase access for young children, especially infants and toddlers with mental health challenges and developmental delays to high-quality care by supporting increased early intervention and increased classroom readiness to meet needs. Given the high incidence of developmental concerns and mental health concerns in the current B-5 population following the pandemic, there are not enough programs or educators with the requisite skills to effectively manage and meet children’s needs. As a result, many B-5 children may experience management approaches that are not best practice, such as exclusionary discipline. Through *Activity 5.1*, more children with developmental and mental health challenges will be identified earlier, engaged in appropriate services, begin receiving supports earlier, and have confidence that ECCE programs will have the skills to best support healthy development. In addition, while RI is not proposing to use PDG funding given the limited time frame, RI anticipates beginning to act on the recommendations from *Activity 2.2 and 2.3* which will directly address needs to expand access to high-quality care for infants and toddlers as well as better align the developmental supports, policies, and programs for children with disabilities. RI is focused on increasing equitable access to high-quality programs through PDG B-5 Planning. **Align and**

**build on other statewide quality improvement efforts:** *Activity 5.1* will build upon and not duplicate efforts already underway and funded by other fund streams. The proposed activity will build on the existing work to have coordinated PDTA for the ECCE through the CCDF-funded PDTA Hub (*see Activity 4*) by expanding the training options to the new trainings on early childhood mental health. Through adopting a recommended model to managing mental health in the classroom, RI will enhance quality across the B-5 system. In addition, the proposed workforce registry in Activity 5 will build upon RI’s newly established social determinants of health referral platform. With the workforce registry, service providers across RI – including B-5 providers as well as housing, healthcare, and other providers – will be able to find and refer infants and toddlers to professionals trained in child mental health.

**Project Timeline and Milestones:**

RI will use the successful grant management systems already in place for PDG B-5 Renewal to ensure RI remains on track for accomplishing the deliverables of PDG B-5 Planning. However, unforeseen factors may accelerate or decelerate progress. For example, if there is leadership or staff level changes among the core agencies, this may decelerate work as capacity is limited. Alternatively, continued stabilization in the ECCE sector as RI continues to emerge from the pandemic may accelerate the work as stakeholders have increased capacity to engage.

PDG Management	Q1	Q2	Q3	Q4	Milestones/Accomplishments by Quarter
Project Team Convened					Q1: Procurements organized, and consultants engaged
Performance Evaluation					On-going throughout life of the grant
Project Data Reviewed					Data reviewed bi-weekly by Project Team Data reviewed monthly by ECCE Governance Data reviewed quarterly at public CC and ELC meetings
Travel					Contingent on meeting scheduling

Grant Manager					Role will support implementation throughout the life of the grant and participate in optional peer learning TA related to workforce
Progress Documentation					On a monthly basis, project leads for each Activity will be responsible for submitting a report on project progress towards deliverables, key accomplishments, challenges, and needs for support to the Grant Manager. The Grant Manager will be responsible for addressing barriers collaboratively with teams and will develop a comprehensive progress report for ECCE Governance review.
<b>Activity 1</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Milestones/Accomplishments by Quarter</b>
1.1 Multi-lingual Learners Needs Assessment					Q1: Develop NA proposal; solicit vendors; award project; develop workplan with vendor Q2: Engage national ECCE MLL expert & conduct NA as defined in scope of work Q3: Identify recommendations to inform new strategies for the state’s MLL Blueprint and ECSP, and disseminate findings
1.2 ECCE Workforce Compensation NA					Q1: Develop proposal; solicit vendors; award project; develop workplan with vendor Q2: Develop study questions; disseminate study Q3: Present initial findings & finalize report and disseminate; develop recommendations to inform ECSP
<b>Activity 2</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Milestones/Accomplishments by Quarter</b>
2.1 Strategic Planning to Support Early Childhood Mental Health					Q1: Solicit and procure focus group vendor. Recruit for and conduct Family for Focus Groups. Q2: Family Focus Groups conclude, begin analysis; draft plan and submit for approval to Governor’s Office and General Assembly Q3: Incorporate recommendations in comprehensive ECSP and Children’s Behavioral Health System of Care Plan
2.2 Infants and Toddlers Strategic Planning					Q1: Develop proposal; solicit vendors; award project Q2: Develop workplan with vendor; begin draft Q3: Complete draft plan and finalize plan based on community feedback and present plan and incorporate in ECSP
2.3 Aligning development supports					Q1: Develop proposal; solicit vendors; award project; solidify the members of the workgroup Q2-Q3: Develop workplan with vendor and begin workgroup meetings to draft plan for modifications and new initiatives Q3: Workgroup to develop a professional development/technical assistance plan and create a clear

					implementation and evaluation plan, and incorporate in ECSP
2.4 RI Pre-K expansion planning					Q1: Develop proposal; solicit vendors; award project Q2: Identify state team members and stakeholders to work with the selected vendor; draft work plan; begin work Q3: Share draft plan for public comment and finalize updated ECSP
<b>Activity 3</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Milestones/Accomplishments by Quarter</b>
3.1 Expand family engagement in governance					Q1: Identify existing and emerging family leadership groups in ECCE Q2-Q4: Support family groups to build leadership capacity and engage family leaders directly in policy discussions and decisions Q4: Survey family leader participants to identify ongoing supports needed to continue engagement
3.2 Pre-K Family Ambassadors					Q1: Create workplan and training series Q2: Begin recruitment and train ambassadors Q3: Ambassadors support family engagement Q4: Wrap up and evaluate impact
3.3 Pre-K Lottery Design Review					Q1: Bring on capacity to conduct design review Q2-Q3: Review of current system, including stakeholder interviews and focus groups Q4: Finalize proposed approach for a new lottery system
<b>Activity 4</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Milestones/Accomplishments by Quarter</b>
4.1 QRIS Evaluation & Enhancement					Q1: Secure third-party expert reviewer Q2 & 3: Complete data collection, interviews, and crosswalks Q4: Development of recommendations
4.2 Tiered Retention Bonus Pilot					Q1: Develop scope of work and bring on vendor to implement the tiered bonus program Q2: Launch application round & conduct outreach to eligible ECCE educators Q3-4: Bonuses distributed Q4: Evaluate impact
4.3 Higher Education Articulation Support					Q1: Hire a Transfer/PLA Coordinator Q2: Establish work group to identify work to date along with persisting needs and gaps Q3/Q4: Develop cooperative solutions to support seamless transfer and promote PLA to expedite credential completion, and support the workforce
<b>Activity 5</b>	<b>Q1</b>	<b>Q2</b>	<b>Q3</b>	<b>Q4</b>	<b>Milestones/Accomplishments by Quarter</b>
5.1 Early Childhood Health Task Force Implementation					Q4: Implementation plan developed and initial implementation underway, including potential targeted trainings

## **Organization Capacity:**

**Responsibilities & Roles of Lead Entity and Partners:** EOHHS – which currently is the PDG B-5 Renewal Grantee – will serve as the lead entity, allowing RI to leverage the systems built in PDG Renewal to ensure successful execution of this grant. EOHHS is uniquely positioned to lead the grant because it (1) directly manages many key B-5 programs (2) the Secretary chairs the Children’s Cabinet, and (3) has oversight of other health and human state agencies partnering to support this grant, including DHS, which manages CCDBG and the State Head Start Collaboration, oversees the QRIS, and supports PD and TA for early learning programs. Just as RI has done with PDG Renewal, EOHHS will partner with the Governor’s Office and fellow Children’s Cabinet agencies, including RIDE, RIDOH, and DHS through the ECCE Governance structure to oversee implementation, development, and management, evaluation. This structure will ensure that the PDG work is aligned with other federal, state, and local ECCE initiatives. EOHHS will be responsible for project oversight, management, and fiscal management of grant activities. EOHHS Acting Secretary **Ana Novais** will oversee staff with primary grant management and implementation responsibilities. Director of Early Childhood Strategy **Kayla Rosen** – project lead of PDG Renewal – will have day-to-day oversight of the PDG project manager. Current PDG B-5 Renewal Grant manager **Meg Hassan** will be responsible for overseeing the completion of all project milestones and deliverables, including completing federal reporting, and will support agency contract managers in overseeing consultants, and communicating with key staff and directors across agencies about project progress. EOHHS Director of Budget and Finance **Lori Zelano** and team will oversee PDG financial management. **Rebecca Lebeau**, Director of Data and Analytics at EOHHS will be responsible for overseeing program evaluation. Partnering agencies will be responsible for

overseeing, executing, and reporting on activities they lead and will have formal agreements with EOHHS to detail scope of work and deliverables to achieve the goals of the grant.

RI will leverage existing structures, including our ECCE Governance, Objective Lead, and Staff Interagency Team meetings, which include staff from DHS, RIDE, RIDOH, EOHHS, and the Governor's Office, to drive coordination between agencies and accomplish PDG planning grant deliverables, in conjunction with PDG Renewal activities. By design, these teams include key staff who oversee the B-5 programs and services that support vulnerable children and families.

RI will use this existing structure to coordinate the grant, with Meg and Kayla driving collaboration, coordination, and action items across departments. Objective Leads, who oversee objectives from our existing ECSP, will continue to serve as liaisons to their respective departments and be responsible for ensuring coordination with various department units as needed. Team members include: **Lisa Foehr**, Chief, Division of Teaching and Learning at RIDE, **Blythe Berger**, Chief, Perinatal and Early Childhood Health, Division of Community Health and Equity, RIDOH, **Ronald Racine**, Senior Associate Director Child Care/ Child Support/ Rehabilitation Services at DHS, **Nicole Chiello**, Assistant Director, Office of Child Care at DHS, and **Kayla Rosen**, Director of Early Childhood Strategy and Children's Cabinet staff in the Governor's Office. RI's B-5 programs are organized by department (*see file 2 for organizational charts*) and are supported by the State's higher education pipelines and the workforce pipelines at the Department of Labor and Training.

**Experience to Ensure Project Success:** EOHHS staff and its partners have sufficient experience, knowledge, and capabilities to successfully complete the proposed project. Key individuals include: EOHHS: **Ana Novais** is the Acting EOHHS Secretary who chairs the Children's Cabinet and oversees state agencies working on this grant. Secretary Novais has

worked for RIDOH since 1998, first as an Education and Outreach Coordinator focusing on children's health issues, and later, as the Minority Health Coordinator. In 2006, as Executive Director of Health, Secretary Novais led the department efforts to achieve health equity. Secretary Novais has Clinical Psychology degree from UCLN, Belgium, and is a graduate from the Northeastern Public Health Leadership Institute. | **Lori Zelano**, Director of Budget and Finance, EOHHS, is responsible for Budget, Finance and Purchasing. She oversees the financial administration, expenditure controls and financial planning of the agency that, among other things, administers Medicaid and oversees all HHS agencies in the state. In addition, she oversees the CFOs of other health and human services agencies. | **Rebecca Lebeau**, Director of Analytics for EOHHS, coordinates analytic and evaluation efforts across health and human services agencies and ensures that agencies have the resources and data they need, when they need it, to execute on their strategic priorities. Previously, Lebeau served in analytic leadership roles for Medicaid. | DHS: **Nicole Chiello**, M.Ed, is the Assistant Director for Child Care at DHS and oversees the administration of CCDF and the Child Care Assistance Program (CCAP) as well as child care licensing. Chiello has a master's degree in early childhood and over ten years of experience in early learning programs, including as a vice president and regional director for a group of early childhood programs. | RIDE: **Lisa Nugent**, Coordinator, Early Learning at RIDE, along with **Zoe McGrath** and **Amanda Blazka** Early Learning Specialists, oversee all aspects of RIDE's State Pre-Kindergarten program and PK - 3rd grade initiatives. Nugent and McGrath are former executive leaders of early learning centers. | RIDOH: **Blythe Berger**, ScD, Chief of Perinatal and Early Childhood Health at RIDOH, oversees family home visiting, WIC, and maternal health programs. She has worked for two decades in ECE systems-building work, and currently focuses on interdepartmental initiatives to improve outcomes for vulnerable children

birth to age 8 years and their families. Dr. Berger also has evaluation and research experience which will support the work of the grant. Dr. Berger coordinated RIDOH work on the RTT-ELC and leads the state's ECCS Grant. | Governor's Office: **Kayla Rosen**, MSW candidate, manages the implementation of the ECCE Strategic Plan and advises the Governor's Office on early childhood policy. In addition, she is the policy director of the Children's Cabinet and facilitates the legislatively created working group on early childhood governance. Rosen previously worked at the Commerce Corporation for Rhode Island and as a strategy consultant for school district superintendents across the country. | **Meg Hassan**, M.Ed., is the current PDG Renewal Grant Manager and supports the implementation of PDG across four state agencies and was previously a kindergarten teacher. | External capacity: As noted in various sections of this application, RI plans to leverage vendor support to ensure adequate capacity and expertise. This will be especially important to provide national contexts for activities.

**Experience & Expertise in Program Areas:** *Sufficient experience and expertise in the program areas of this FOA:* The proposed project team includes experts in the fields of public health, education, early childhood development, trauma-informed approaches, program evaluation, data and analytics, systems alignment, and community engagement. The RI team includes a former kindergarten teacher, former early childhood center directors, and a former consultant for K-12 superintendents. This team brings not only experience in their current roles, but also experience in the field and as RI parents and residents. *Experience in collaboration with partner organizations:* The team described above already meets and collaborates regularly to implement the ECSP objectives. This planning grant opportunity will enhance and accelerate these ongoing efforts and will have a smooth implementation in RI due to the existing relationships and partnerships across organizations. The State team will collaborate frequently with the ELC,

which has convened statewide partners across the B-5 system for almost a decade, as well as other stakeholders. *Experience in culturally and linguistically competent service delivery:* State agencies are required to provide services in multiple languages. RI also has existing master purchasing agreements with several translation services and will furnish language support as needed. RI also has taken a proactive approach to cultural and linguistic competence, such as by creating Spanish-language ECCE workforce development programming in higher education. Many agencies also require their community partners to be trained in CLAS standards.

*Experience in administration, development, implementation, management, and evaluation of similar projects:* RI has deep experience managing multi-partner projects that support the B-5 system, including current PDG Renewal grant, the RTT-ELC grant, the MIECHV long-term FHV programs, the legacy PDG Expansion Grant, and CCDBG. RI will build on these experiences and lessons learned to ensure smooth and successful administration, development, implementation, management, and evaluation of the PDG planning opportunity. EOHHS has a significant track record of managing multi-faceted, system-building grants that engage other state agencies, provider networks, workforce, and stakeholders to achieve sustainable systemic change. EOHHS was awarded PDG Renewal, manages RI's Medicaid program, and is also administering a SAMHSA grant related to Children's Behavioral Health. *Fiscal and administrative capacity:* EOHHS successfully manages the finances and administration for several federal programs, including Medicaid as well as numerous other federal grants. EOHHS works regularly with a wide range of contractors, vendors, and partner state agencies to achieve its mission, and will leverage this experience and capacity to manage the components of the proposed PDG B-5 grant. The activities supported by this grant will be set in this broad and deep programmatic and fiscal context, allowing EOHHS to leverage resources and expertise across

many programs. *Performance management capacity:* RI has strong performance management expertise and systems to manage the grant activities. EOHHS has a robust performance management system, which leverages the Ecosystem to outline key metrics and progress towards Strategic Plan goals (*see PPEP*). **PDG & Alignment with other funds:** RI's proposed use of grant funds will complement existing initiatives and maximize resources. Activities proposed in this application will drive the updating and continued execution of RI's ECSP that was created using PDG Initial funds. RI's ECSP objectives demonstrate RI's commitment that all children, particularly from RI's identified priority populations, will have access to high-quality care and learning opportunities. To achieve this goal, RI will continue to align resources, services, and regulations, all of which are fundamental to accomplishing the overall vision for the state's Strategic Plan.

At the center of all of RI's work is a deep commitment to investing in and strengthening the mixed-delivery system. This includes the continued investments in RI Pre-K through local education agencies, community-based organizations, and Head Start Programs. Additionally, RI works collaboratively on priority workstreams and in a unified governance model to support the mixed-delivery system and an overall aligned system.

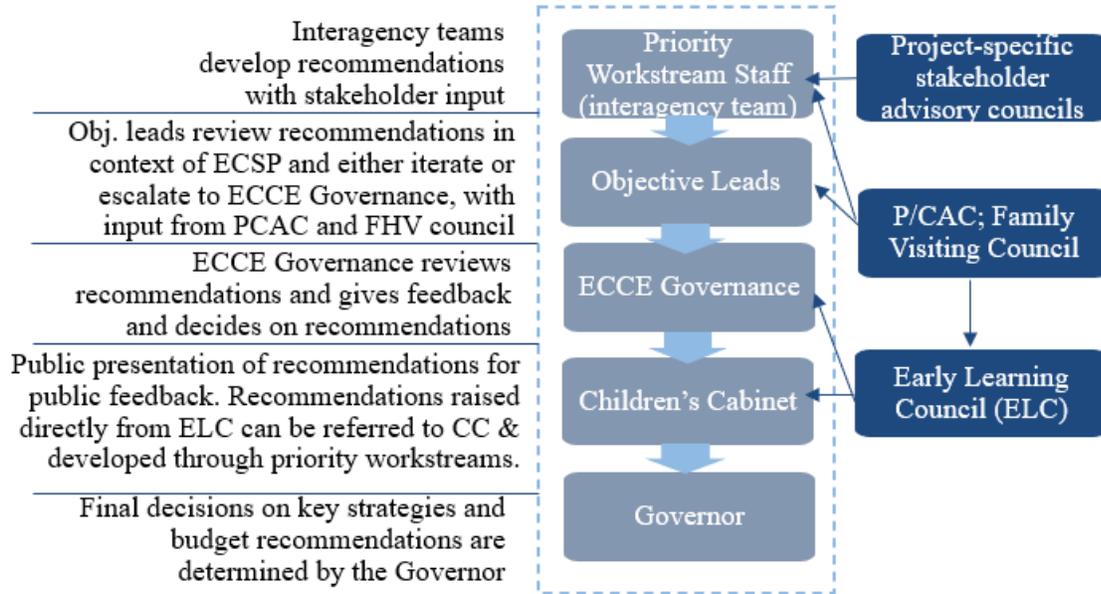
Should RI be awarded this grant, the activities will complement on-going initiatives including: RI's use of stimulus funds, on-going quality initiatives funded through CCDF, expansion of RI Pre-K using state and federal funds, PDG Renewal activities, and workforce supports. See the PPEP section for a chart that shows alignment between proposed activities and RI's Strategic Plan objectives.

### **Meaningful Governance & Stakeholder Engagement:**

**Early Childhood Governance Structure:** RI's Early Childhood Governance Committee is where key interagency decisions are made and is comprised of the four agencies that administer a variety of early learning services and programs. The Committee is chaired by the Governor's Office with membership from the executive leader of (1) EOHHS – which includes the state's Medicaid office, (2) DHS, (3) RIDE, and (4) RIDOH. Priority workstream teams bring findings and key decisions to this leadership group for discussion, feedback, and approvals monthly. This structure was established during RI's initial PDG funding and has continued during the PDG Renewal (*see Activity 2 for more details*). **State Early Learning Council:** RI ELC was formed in June 2010 according to the guidelines for State Early Care and Education Advisory Councils outlined in federal law. Council members are appointed by the Governor and include key leaders representing all the sectors of the early learning and development field serving children from birth through third grade. ELC acts as an advisory body to both the Governor and the Children's Cabinet. The Council is co-chaired by RIDE, DHS, and the Executive Director of Rhode Island KIDS COUNT. The ELC's overarching goal is to improve early learning and development outcomes for children from birth through age 8 by ensuring that more children, particularly from low-income and vulnerable families, participate in high-quality early learning programs. During quarterly meetings, the Council reviews data and research, develops policy recommendations, and advises the state on funding opportunities. Most recently, ELC has been instrumental in the co-writing of the RI Pre-K expansion report. In addition, members of the ELC have provided substantial feedback in the development of RI's PDG Planning grant proposal. **Family Engagement:** RI works to incorporate family voice throughout our B-5 system. RIDOH facilitates a Parent / Caregiver Advisory Council which provides a venue for families and caregivers to participate in the policy process. RI is dedicated to more regularly and

meaningfully engaging families in B-5 related decisions and has proposed relevant activities within Activity 3. Provider Engagement: To support provider voice in our B-5 system, RI has several meetings with providers. Quarterly, DHS hosts an all-provider meeting to share relevant information with the field and receive input and feedback on proposals that impact child care providers in RI. Also quarterly, RIDOH facilitates a Family Home Visiting Council made up of professionals who provide family home visiting services across the state so that family visitors can share experiences and work collaboratively with the state to deliver services to families. On a bi-monthly basis, RIDOH convenes a pediatric advisory council to discuss emerging health issues and programmatic needs with pediatricians across RI. Community Engagement: RI's Children's Cabinet, which is established in statute, meets monthly to discuss all issues related to children across state agencies, prepare a shared strategic plan, and develop a coordinated children's budget. The interagency group is chaired by the Secretary of EOHHS, with the Commissioner of RIDE serving as vice chair. RI state agencies are able to share key information with stakeholders and receive public input and comment from various stakeholders. Additionally, RI will leverage the state's Early Intervention Interagency Coordinating Council (ICC), which is made up of parents, providers, and state staff to support grant activities.

*Decision Map*



**Project Sustainability:** If awarded, RI’s PDG B-5 project will build upon a decade of focused state and community-wide collaboration for the B-5 system supported by several federal awards and dedicated state funds. RI has successfully sustained many of the efforts that developed out of RTT-ELC and PDG B-5 – among others – and will similarly sustain key, proven elements of this planning grant. During both PDG B-5 Initial and Renewal, RI has collected data to inform sustainability needs and has prioritized funding PDG pilots that have showed positive impacts. While PDG Renewal is still funding various pilots, state agencies have included sustainability funding requests in their FY24 Budget requests. Where appropriate, RI has also sought other funding opportunities, such as leveraging Medicaid to continue the expansion of Family Home Visiting. PDG pilots have also helped leverage additional funding sources for B-5 investments including to further expand RI Pre-K and supporting the workforce through bonuses, credential pathway development, and preservice trainings. These efforts have allowed RI to maximize federal and state funds, including blending, braiding, and layering CCDF, Head Start, and State

Pre-K funds which has increased access to high-quality RI Pre-K seats. RI has a history of and will continue to sustain key structures that support a strong B-5 system including the ELC, Children’s Cabinet, Early Childhood Governance, and interagency project teams.

The state’s strong PPEP will allow RI to have sufficient information about which activity elements have been most effective at improving both practices and outcomes for children, families, and providers. State staff implementing the grant activities will be responsible for identifying sustainability needs and the grant manager will collate and share the needs with ECCE leadership. This will allow RI to be well positioned to sustain key elements of this PDG planning grant opportunity. Additionally, given the time-limited nature of this grant opportunity, RI has strategically chosen some of the proposed activities to be capacity building efforts. This includes activities that will support the continued development and implementation of our B-5 programs. RI remains ready to implement capacity building and pilot projects with a key focus on sustainability beyond the life of the PDG planning grant opportunity.

### **Program Performance Evaluation Plan (PPEP)**

**Existing PPEP through PDG B-5 Renewal, aligned to RI’s Strategic Plan:** Through RI’s PDG Initial and Renewal period, RI developed, a series of key metrics to measure progress on the objectives and strategies of the ECSP. From these metrics, RI can identify progress and performance of activities within the ECSP, identify gaps and areas for improvement, and work to enhance the overall health of the ECCE system. Collectively, these metrics known as the ECCE Scorecard and are made available at the child and provider-level, stratified by identified priority population groups (*as defined in RI’s ECSP, see Activity 2*), and provide information about capacity for programmatic, policy, and funding decisions. The ECCE Scorecard allows RI to make data-driven decisions, and above all, ensures equity is at the forefront of ECCE decision-

making. RI uses the Scorecard at monthly ECCE Governance meetings, bi-weekly staff-level Objective leads meetings, and at public Children's Cabinet and Early Learning Council meetings to discuss progress, identify emerging issues, and drive CQI. RI will use the Scorecard to review progress on the PDG Planning activities.

**Current status of ECCE Scorecard, organizational systems, and processes:** To date, RI has created and enacted an analytic plan with staffed capacity from the Ecosystem Team. Currently, PDG Renewal funding supports dedicated capacity to build the foundational components of the Scorecard. Of the 44 current metrics developed to evaluate progress on the ECSP, 59% have been analyzed, and the remaining metrics are in process of being analyzed. Each metric is visualized on an interactive dashboard using PowerBI that provides an overview of licensed providers, and unduplicated counts of children and their engagement within the ECCE system, and whether they fall into one or more priority population groups. Once a metric visualization is drafted in PowerBI, analytic staff facilitate a comprehensive review process with stakeholders to ensure that data are clear and meet programmatic needs. The Scorecard is a sustainable PPEP because it will automatically update as organizations continue to provide new data in accordance with the Data Use License (DUL) and Data License Request (DLR).

**Data Systems, Data Elements, and Data Sharing Protocols:** The ECCE Scorecard leverages a cloud-based data warehouse, known as the Ecosystem, within EOHHS. The Ecosystem takes previously disparate data sources and employs a person-matching algorithm to link these data at the person level. This allows RI to understand the full spectrum of ECCE services available, understand how parents and children engage with the ECCE system, and identify disparities in access to and quality of care. The ECCE Scorecard is assessed by a cross-agency committee of Data Stewards and maintains a DUL and DLR signed by every organization that provides data to

support this work. Currently DHS, DCYF, EOHHS, RIDE, RI Coalition to End Homelessness, and RIDOH have agreed to provide a baseline and quarterly- at minimum- update of data for the life of the Scorecard for children aged zero to five from 2018 onward through a secure file transfer protocol. Data Stewards and supporting organizations are provided with regular updates to allow for revisions in scope, course-corrections, and feedback on analytic products to support continuous quality improvement and utilization.

**Proposed use of PPEP and enhancements for PDG Planning:** Note: "ECSP Obj" in the table below stands for ECCE Strategic Plan Objective and identifies to which of the five core objectives in RI's ECSP the proposed PDG Activity is aligned (*see Activity 2*).

<b>PDG Activity</b>	<b>ECSP Obj</b>	<b>Inputs/Key Activities/Outcome</b>	<b>ECCE Scorecard Metric *=<b>new data sets needed</b></b>
1.1	2	RI Pre-K and CCDF staff time; expert consultation; MLL family and stakeholder engagement. <i>Outcome: updates to comprehensive NA and data to inform the ECSP</i>	% MLL students accessing high-quality ECCE*
1.2	1, 3	CCDF, RI Pre-K, and EI staff time; survey vendor support; survey development and implementation. <i>Outcome: updates to comprehensive NA and data to inform the ECSP</i>	% Retention of ECCE educators annually*
2.1	1	CCDF and MIECHV staff time; expert consultation; stakeholder engagement and feedback. <i>Outcome: updates to the ECSP</i>	% I/T programs rated high-quality on QRIS
2.2	2	EI and ECSE staff time; expert consultation; stakeholder engagement and input <i>Outcome: updates to the ECSP</i>	% B-5 children accessing EI/ECSE/ KIDS CONNECT
2.3	3	Pre-K staff time; expert consultation; stakeholder engagement and input <i>Outcome: updates to the ECSP</i>	% Children accessing RI Pre-K

2.4	2	Medicaid and MIECHV staff time; expert consultation; stakeholder engagement and input <i>Outcome: updates to the ECSP</i>	% B-5 children receiving mental health services*
3.1	4, 5	RIDOH and DCYF staff time; family leader time and training; meeting facilitation and addressing barriers to meeting access <i>Outcome: increased number of family leaders with active role in ECCE governance</i>	# Stakeholders engaged in ECCE governance
3.2	3	RIDE staff time; Pre-K ambassador time; trainings for Pre-K ambassadors <i>Outcome: increased # of RI Pre-K applications from priority populations</i>	% Priority populations applying for RI Pre-K
3.3	3	RIDE and state information technology staff time; expert consultation; family input and user testing <i>Outcome: design for new lottery system that centers equity and access</i>	% Priority populations applying for RI Pre-K
4.1	1	CCDF and QRIS staff time; expert consultation; stakeholder feedback and input. <i>Outcome: increased number of providers participating in QRIS</i>	% Of ECCE providers rated high-quality on QRIS
4.2	1, 3	CCDF staff time; vendor to manage applications and bonuses; distribution of bonuses; data evaluation of pilot <i>Outcome: increased retention for highly-qualified ECCE educators through increased compensation</i>	% Retention of ECCE educators annually*
4.3	1, 3	OPC staff time; IHE staff time; new staff capacity to address individual and systemic needs to increase articulation. <i>Outcome: increased articulation across IHEs</i>	% ECCE educators with advanced degrees
5.1	2	PDTA, development of workforce registry, and adoption of universal screening system <i>Outcome: providers ready to support children with mental health needs</i>	% B-5 children receiving mental health services*

**Enhancements:** RI will leverage PDG Planning to enhance the Scorecard to track and measure new metrics that emerge from the findings of Activities 1 and 2. For example, if a new Objective

or Strategy for the ECSP is developed, RI will develop associated metrics to incorporate into the ECCE Scorecard. RI will expand staff capacity dedicated to the ECCE Scorecard as well as leverage new data sets to incorporate into the person-level matching.

**Obstacles:** While RI has several DUL and DLRs in place to support the ECCE scorecard, additional data sets may be required to fulfill the needed monitoring and evaluation of new metrics. There may be obstacles in securing access to these data sets in a timely manner or conducting matching with data sets that are incomplete. RI will work with potential data partners to address data sharing concerns and build shared ownership to expedite data sharing processes.

**Dissemination Plan:**

RI strives to share information with stakeholders about the on-going work to support the ECCE system at the state level. The overall goal of disseminating information is to gain input from stakeholders to drive policy decisions. Receiving feedback strengthens RI's overall outcomes as a state. RI regularly demonstrates the state's commitment to disseminating and cocreating materials with stakeholders' engagement. In 2022, caregiver feedback altered the NA family survey to include information about non-standard hours of care. State staff and stakeholders also recently worked together to brainstorm key features of the RI Pre-K Expansion Report.

For the purposes of this grant, RI will disseminate project updates, project interim reports, final reports, and outputs through several channels to ensure that all stakeholders have access. PDG updates will be a regular agenda item at the public meetings of the Children's Cabinet (monthly) and the ELC (quarterly). The state will also leverage additional meetings of stakeholders, such as the Permanent Legislative Commission on Child Care, and caregiver groups (*see Activity 3*) to share on-going updates and receive feedback. The Project Team will also post information on the Children's Cabinet website to ensure that information is easily accessible for all stakeholders and

will track site visits and downloads to understand how widely the outputs are being reviewed and used, with a focus on disaggregating by priority populations where possible. The state will also use the stakeholder engagement sessions and venues proposed in this application to share broader updates about the project. RI will explore the potential of creating a dedicated communications resource, such as a newsletter or social media, to engage additional stakeholders which will be distributed widely to the ECCE sector. Finally, in this application, RI has included appropriate resources for dissemination in each activities' proposed budget and the Project Team will ensure that this is part of their work. Dissemination for each component will be contingent on each activities' unique timeline (*see Project Milestones and Timelines*).

### **Oversight of Federal Award Funds**

EOHHS ensures that grant activities and partners adhere to applicable federal and programmatic regulations through its selection of contractors, composition of the contracts, and management of the contracts. The selection of solid partners is the foundation of proper oversight. This is overseen by Lori Zelano, Director of Budget and Finance for EOHHS. Jennifer Pate, Financial Management Associate Director at EOHHS, will also support the oversight of PDG. In the past several years, EOHHS has identified key personnel and units within state agencies, as well as external partners, who have been involved with EOHHS in strengthening ECCE. EOHHS is well-positioned, along with the other agencies that are part of ECCE Governance in RI, to select partners for PDG B-5 who are experienced, reliable, and equipped to meet timelines and deliver products. This will reduce the risk of wasteful spending and increase the effective use of federal funds. Each agency participating in the grant prepares contracts with detailed and specific Scopes of Work that clearly state program objectives and performance benchmarks. In the Scopes of Work, reference is made to the federal laws and regulations with which contracted activities

must comply, along with expectations for the collection and analysis of data related to the goals set out in the contract. Contract managers work with fiscal staff to ensure sufficient oversight of projects and funds in contracts. Funds are expended on a reimbursement basis through monthly invoicing. Invoices must be accompanied by detailed documentation of expenditures. As a matter of department practice, invoices and documentation must be approved by both program and fiscal staff before processing. In addition, if payments to agencies exceed \$25,000 in the most recently completed fiscal year, they are required to send the department financial statements within nine months after the end of their fiscal year for review. Agency finance staff will work to remedy any noncompliance. Information relevant to RI-specific procurement procedures can be found in the *Budget and Justification* section.

### **Protection of Sensitive / Confidential Information**

RI takes significant measures to safeguard personally identifiable information (PII) as well as other information that is considered sensitive. Where appropriate, EOHHS agencies follow federal HIPPA procedures and RIDE follows FERPA protections. EOHHS has a series of steps and trainings to proactively protect PII. This includes annual mandatory trainings for all staff covering HIPPA policies, including areas such as workforce statement of responsibility and confidentiality, breach policy, breach reporting form, and privacy and security officers. This training is also mandatory for all new agency hires (state, contract, and interns). Any vendors that will have access to PII must address their policies and procedures for data protection as part of their contract. In addition, RI requires vendors with access to PII to carry robust insurance to address any data breaches. Data security is a top priority for RI. For the purposes of this grant, some PII may be collected during needs assessments and RI will ensure that the vendor complies with RI policies.

Additionally, **the Ecosystem** – including the ECCE Scorecard -- consistently integrates and manages PII across various agencies and will be conducting PPEP work for this grant (*see the PPEP section*). The Ecosystem has clear policies and practices that ensure that data is protected, including protecting data consistent with a HIPAA Limited Data Set (45 CFR § 164.514(e)(2)) during both the data request and dissemination processes. Data requesters are required to complete a series of legal documents such as a Data License Request (DLR) and Data Use License (DUL) that identify the scope of the project, cell suppression requirements, and individuals authorized to view data provided by the Ecosystem, among other project-specific information. Each DLR is reviewed by a Data Steward Group where committee members will approve, require revisions, or reject the request. Data received by the Ecosystem requires select individuals within the Ecosystem Technical Team to employ a person-matching algorithm using minimum PII necessary to develop an analytic table to be used in support of respective projects. However, once this is accomplished, data elements in the analytic table that otherwise meet the definition of PII but are necessary for analysis such as Date of Birth are obfuscated to maintain integrity and anonymity. The Ecosystem specifies requirements for data retention and destruction through the DUL. Used concurrently with the DLR, each Ecosystem project requires data must be destroyed, with no project data or derivative files retained, within 30 days of the project end date. The Ecosystem data recipient is additionally required to complete a "Certification of Project Completion and Destruction of Data" form. Exceptions can be made with written authorization from the Data Stewards Group. These policies ensure that PII and other sensitive information is protected.